

**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: PAYCOM BILLING SERVICES, INC.

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 4215 Glencoe Avenue, 1st Floor
Marina del Rey, CA 90292

Name of Agent Designated to Receive Notification of Claimed Infringement: Gregory L. Richey

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

4215 Glencoe Avenue, 1st Floor
Marina del Rey, CA 90292

Telephone Number of Designated Agent: (310) 827-5880

Facsimile Number of Designated Agent: (310) 827-5519

Email Address of Designated Agent: greg@paycom.net

Signature of Officer or Representative of the Designating Service Provider:

Date: November 12, 1999

Typed or Printed Name and Title: Clay Andrews, President

**Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee
Made Payable to the Register of Copyrights.**

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